

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?: None
Number of CD Disks::
Number of Copies of CDs::
Sequence Submission?:
Computer Readable Form (CRF)?:
Number of copies of CRF::
Title:: PEST BARRIER
Attorney Docket Number:: SADOSKI 2
Request for Early Publication?: No
Request for Non-Publication?: No
Suggested Drawing Figure::
Total Drawing Sheets:: 0
Small Entity?: Yes
Latin Name::
Variety Denomination Name::
Petition Included:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Israel
Status:: Full Capacity
Given Name:: Arie
Middle Name:: Y.

Family Name:: SADOVSKI
Name Suffix::
City of Residence:: Rishon-Lezion
State or Province of Residence::
Country of Residence:: Israel
Street of Mailing Address:: 34 Hagalil St.
City of Mailing Address:: Rishon-Lezion
State or Province of Mailing Address::
Country of Mailing Address:: Israel
Postal or Zip Code of Mailing Address:: 75236
Applicant Authority Type:: Inventor
Primary Citizenship Country:: Israel
Status:: Full Capacity
Given Name:: Rueven
Middle Name::
Family Name:: SHACHAR
Name Suffix::
City of Residence:: Kfar-Aza
State or Province of Residence::
Country of Residence:: Israel
Street of Mailing Address:: M.P. Negev
City of Mailing Address:: Kfar-Aza
State or Province of Mailing Address::
Country of Mailing Address:: Israel
Postal or Zip Code of Mailing Address:: 75236
Applicant Authority Type:: Inventor
Primary Citizenship Country:: Israel
Status:: Full Capacity
Given Name:: Hana
Middle Name::
Family Name:: SCHWARTZ
Name Suffix::
City of Residence:: Nahal Shima

State or Province of Residence::

Country of Residence:: Israel

Street of Mailing Address:: 74 Rimon St., M.P. Har Hevron

City of Mailing Address:: Nahal Shima

State or Province of Mailing Address::

Country of Mailing Address:: Israel

Postal or Zip Code of Mailing Address:: 90406

Correspondence Information

Correspondence Customer Number:: 001444

Representative Information

Representative Customer Number:: 001444

Domestic Priority Information

Application::	Continuity Type::	Parent	Parent Filing
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Application::	Date::
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This Application	National Stage of	PCT/IL04/000313	04-05-04
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Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Israel	155304	04-09-03	Yes

Assignment Information

Assignee Name:: KAFRIT INDUSTRIES (1993) LTD.

Street of Mailing Address:: M.P. Negev

City of Mailing Address:: Kfar-Aza

State or Province of Mailing Address::

Country of Mailing Address:: Israel

Postal or Zip Code of Mailing Address:: 85142